	****************
102) Cartification Agent / Cartier FCC Form 690	2463114110111
102) Certification - Agent / Cartler FCC Form 690	11/11/12/18/60
	826/16/16/17
Approved by OMB	
Approved by Onto	
**	110111231103453
OMB Control No. 3060-1185	
· · · · · · · · · · · · · · · · · · ·	8888888888
Page 8 of 8	4344110110

<010>	Study Area Code	238028
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<030>	Contact Email Address - Email Address of person identified in data line <030>	telamowitz@fcclaw_com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

ing the accuracy of the data reporting requirements provided to the authorized I agent is accurate.
Date:
ate for this form: 07/01/2016

Certification of Agent Authorize	d to File for Mobility Fund Recipients on Beh	nalf of Reporting Carrier
as agent for the reporting carrier, certify that I am authorize ported herein based on data provided by the reporting carr	d to submit the reports for Mobility Fund recipient er; and, to the best of my knowledge, the informat	s on behalf of the reporting carrier; I have provided the data ion reported herein is accurate.
ame of Reporting Carrier: Carolina West Wire	less, Inc.	
ame of Authorized Agent Firm: Lukas	, Nace, Gutierrez & Sachs, LLP	
gnature of Authorized Agent or Employee of Agent:		Date: 06/17/2016
ame of Authorized Agent Employee:	Todd Slamowitz	
tle or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
elephone number of Authorized Agent or Employee of Agent	: 7035848678 ext.	
udy Area Code of Reporting Carrier: 238028	Filing Due Date for this form:	07/01/2016

## **Attachments**

# (060) Coverage and Performance Report

<141>

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	238028
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2015 - 12/2015

<a1> Certify that **Total Road** Coverage and Resident Road Miles **Total Resident** Miles Performacne Population per Census Resident Population **Road Miles** covered per data is uploaded Block Newly Population per **Newly Reached** Reached by per Census Census Block (yes/no) by Service County Caldwell Census Block Census Block State Service Block Reached 0000 NC 0 Yes 0 0.0 0.0 0.0

Percentage of
<b>Total Population</b>
Reached by
Service

I	0			
ļ				
İ				

Percentage of Total Road Miles covered by Service

	 	_	
0			

#### **FCC FORM 690**

## (060) COVERAGE AND PERFORMANCE REPORT

Carolina West Wireless, LLC did not complete any drive tests with respect to the SAC associated with this filing during the reportable period.

#### Carolina West Wireless, Inc.

#### **Project Status Description**

Pursuant to Section 54.1009(a)(6) of the Commission's rules, Carolina West Wireless, Inc. ("CWW") submits that, during the reportable period, there were no material updates to its project description, network design, construction, deployment and maintenance associated with this Study Area Code ("SAC") that was provided by CWW in its long-form application (the "FCC Form 680") filed in conjunction with its Auction 901 winning bids.

During the reportable period, CWW continued to construct and deploy its network in the eligible areas associated with this SAC. It anticipates that it will submit its drive testing data in conjunction with its request for final disbursement no later than July 19, 2016.

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

•				FCC Form
Mobility Phase 1	Fund §54.1009 Annual Reporting		Aug Bired	Approved by OMB OMB 3060-1185 en Estimate per Respondent: 18 Hours
Data Col	lection Form		Avg. burut	in Listangic pc. n.c.pp. locum. 10 /100/6
<010>	Study Area Code	238029		
	Study Area Name	Carolina West Wireless, Inc.	A	ccepted / Filed
<020>	Program Year	2016		
<030>		Todd Slamowitz		JUN 23 2016
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.	Fede	al Communications Commission Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com		
***************************************				uumaaseesatteetutusuonen esissä suunun hiteisa siin muniistestiin.
<040>	Has the information required pursuant to §54.1009	been provided with a Form 481 filing (	<u>(/N)</u> <040>	•
	<041> Attach a description of the documents fil	ed with the Form 481 reporting	<041>	
	<042> Cite the Study Area Code (SAC) for the Fo	orm 481 reporting	<042>	
<080>	Tribal Lands Reporting (y/n?) (Does this study area cou	ver tribal lands? Yes or No)	0	•

#### Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

					¥657
(050) Carri	er Contact Form	10-3			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code		238029		
<015>	Study Area Name		Carolina West Wireless,	Inc.	
<020> <030>	Program Year Contact Name - Person USAC should contact regarding this	s data	2016 Todd Slamowitz		
<035>	Contact Telephone Number - Number of person identified		7035848678 ext.		
<039>	Contact Email Address - Email Address of person identified	d in data line <030>	tslamowitz@fcclaw.com		
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder				
<110>		1940022			
<111>	•	Carolina West Wirel	ess, Inc.		
<112>	_	Carolina West Wirel			
<113>		1307 Curtis Bridge			
		Wilkesboro			
<114>	City				
<115>		NC			
<116>		28697			
<117>	<del>-</del>	3369735000 ext.			
<118>	_	3368387550			
<119>	Email Address	slaytons@carolinawe	est.com		
Contact In	if same as above, indicate in this box  Name (First, MI, Last, Suffix)	Name C. Stavent			
		Slavton S. Stewart Carolina West Wirel	ess Inc		
<121>	Start Address (se DO Deut)				
<122>		307 Curtis Bridge.	Road		
<123>		Vilkesboro			
<124>	State	ıc			
<125>	Zip-Code 2	28697			
<126>	Telephone Number	3369735000 ext.			
<127>	Fax Number 3	3368387550			
<128>	Email Address s	slaytons@carolinawe	st.com		
	_				
A Ab b	d 8 t Information				
Autnorize	if no agent, indicate in this box				
-120s		and Clamority			
<130>	_	odd Slamowitz ukas, Nace, Gutier	rez f Sachs IID		
<131>	our party				
<132>	Street Address (or 1 o oon)	3300 Greensboro Dri	ve, Suice 1200		
<133>	City _M	IcLean			
<134>	State <u>v</u>	/A			
<135>	Zip-Code2	22102			
<136>	Telephone Number	7035848678 ext.			
<137>	Fax Number	7035848696			
<138>	Email Address	slamowitz@fcclaw.c	om		
	_				

(060) Co	verage and Performance Report	FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	238029
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

01/2015 - 12/2015

060\_Coverage and Performance Report (Unconsructed).zip

Coverage and Performace attachments

Coverage and Performance Report Year

Percentage of Total

Population Reached by

Service

<140>

<141>	<a1>;</a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<c1></c1>	<c2></c2>	<c3></c3>	<d>&gt;</d>
	State	County		Resident Population per	Resident	Population	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (Yes/no)
				(	ee attach	ed works	neet			

Percentage of Total

Road Miles covered

by Service

(070) Urban Rate Comparability Certification Compliance	FCC Form 690
	Approved by OMB OMB Control No. 3060-1185
	Page 4 of 8.

<010>	Study Area Code	238029
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

I certify that I am an officer or employee of	the reporting carrier; my responsibilities include ensuri	ng compliance with 47 CFR §54.1009(a)(4), the information reported on this
form and in any attachments is accurate.		-8 compliance with 47 CTR \$34.2005(a)(4), the information reported on this
Name of Reporting Carrier:		
Signature of Authorized Officer:	CERTIFIED ONLINE	Date 06/23/2016
Printed name of Authorized Officer:	Thad Southers	
Title or position of Authorized Officer:	СГО	
Telephone number of Authorized Officer:	3369735090 ext.	
Study Area Code of Reporting Carrier:	Filing Due Date	for this form:

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

carrier. I also certify that I am an offi	s, Nace, Gutierrez & Sachs, LLP cer or employee of the reporting carrier; my my knowledge, the reports and data provid	responsibilities include ensu	submit the information reported on behalf of the reporting uring compliance with 47 CFR §54.1009(a)(4) reported to the accurate
Name of Authorized Agent:	Lukas, Nace, Gutierrez & Sachs		
Name of Reporting Carrier:	Carolina West Wireless, Inc.		
Signature of Authorized Officer or Emp	loyee:		Date:
Printed name of Authorized Officer or	Employee:		Date.
Title or position of Authorized Officer	or Employee:		
Telephone number of Authorized Offic	er or Employee:		
Study Area Code of Reporting Carrier:	238029	Filing Due Date for this form:	07/01/2016
Persons willfully making false stat	ements on this form can be punished by fine or for under Title 18 of the U	feiture under the Communications nited States Code, 18 U.S.C. § 1001	s Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment 1.

I, as agent for the reporting carrier, certify that I am	authorized to submit the certification on behalf of the	he reporting carrier; I have provided the data reported herein b
data provided by the reporting carrier; and, to the b	est of my knowledge, the information reported herein i	in is accurate.
Name of Reporting Carrier:	Carolina West Wireless, Inc.	
Name of Authorized Agent Firm:	Lukas, Nace, Gutierrez & Sachs, LLP	
Signature of Authorized Agent or Employee of Agent:		Date: 06/17/2016
Name of Authorized Agent Employee:	Todd Slamowitz	
Title or position of Authorized Agent or Employee of		
Telephone number of Authorized Agent or Employee	of Agent: 7035848678 ext.	
Study Area Code of Reporting Carrier: 238029	Filing Due Date for this f	is form: 07/01/2016

(O) Triba	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
010>	Study Area Code		238029	rage Julio
010> 015>	Study Area Code Study Area Name		Carolina West Wireless, Inc.	
)20>	Program Year		2016	
)30>	Contact Name - Person USAC should contact regarding this	data	Todd Slamowitz	
035>	Contact Telephone Number - Number of person identified		7035848678 ext.	
039>	Contact Email Address - Email Address of person identified		tslamowitz@fcclaw.com	
:142>	State			
:143>	County		·	
:144>	Tribal Land(s) on which ETC Serves	,		
<145>	Tribal Government Engagement Obligation	lame of Attached Docum	ent (.pdf)	
	If your company serves Tribal lands, please select (Yes, No, each of these boxes to confirm the status described on the PDF, on line 145, demonstrates coordination with the Trib government pursuant to § 54.1004 includes:	attached		

<146> Needs assessment and deployment planning with a focus on Tribal community anchor institutions; Feasibility and sustainability planning; <147> <148> Marketing services in a culturally sensitive manner; <149> Compliance with Rights of way processes <150> Compliance with Land Use permitting requirements Compliance with Facilities Siting rules <151>

Compliance with Environmental Review processes

<152>

<153> <154>

Select

(Yes, No, Not Applicable)

			man
(0 <b>90)</b> Project	Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8	
-0105	Chindry Area Coda		
<010>	Study Area Nome	238029	-
<015>	Study Area Name	Carolina West Wireless, Inc.	_
<020> <030>	Program Year  Contact Name - Person USAC should contact regarding this data	Todd Slamowitz	_
<035>	Contact Telephone Number - Number of person identified in data line <030>		_
<039>	Contact Email Address - Email Address of person identified in data line <030>		_
<b>\035</b> /	Contact Email Address - Email Address of person identified in data line 3050	CSTGIIIONTEZSACCIUN . COIII	_
<200>	Date Authorized to Receive Support	07/18/2013	
<201>	Targeted Completion Date	07/19/2016	
<202>	Total Mobility Fund Support Awarded		
<203>	Total Mobility Fund Support Disbursed		
<210>	Actual Completion Date		
<211>	Project Status Description (attached)	211_PSD_NC.pdf	
		{Name of PDF attached}	
	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.	· · ·	
<212>	Status of Network Deployment - Network Design	/	
<213>	Status of Network Deployment - Construction	<b>✓</b>	
<214>	Status of Network Deployment - Deployment	✓	
<215>	Status of Network Deployment - Maintenance	<b>✓</b>	
<216>	Project Budget Status	<b>✓</b>	
<217>	Project Plan Status		
<218>	Network will Support 3G/4G Mobile Service ?	) 3G <b>(</b> ) 4G	

(101) Certification - Reporting Carrier	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185
	Page 7 of 8

<010>	Study Area Code	238029
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.		
Name of Reporting Carrier:		
ignature of Authorized Officer: CERTIE	IED ONLINE	Date 06/23/2016
rinted name of Authorized Officer:	outhers	
itle or position of Authorized Officer:		
elephone number of Authorized Officer:	69735090 ext.	
itudy Area Code of Reporting Carrier:	Filing Due Date for t	his form:

06/16/2016 Page 7

(102) Certification - Agent / Carrier	
(and the interest of the inter	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185
	Page 8 of 8

<010>	Study Area Code	238029
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP also certify that I am an officer of the reporting carrier; my responsibilities include ea agent; and, to the best of my knowledge, the reports and data provided to the author	is authorized to submit the information reported on behalf of the reporting carrier. I insuring the accuracy of the data reporting requirements provided to the authorized rized agent is accurate.
Name of Authorized Agent: Lukas, Nace, Gutierrez & Sachs, LLP	
Name of Reporting Carrier: Carolina West Wireless, Inc.	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier: 238029 Filing Du	ue Date for this form: 07/01/2016
Persons willfully making false statements on this form can be punished by fine or forfeitu	are under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment d States Code, 18 U.S.C. § 1001.

f of Reporting Carrier
n behalf of the reporting carrier; I have provided the data reported herein is accurate.
Date: 06/17/2016
07/01/2016
·

## **Attachments**

[060] Coverage and Performance Report FCC Form 690	7///27///5
Approved by OMB	
OMB Control Na: 3060-1	185

<010>	Study Area Code	238029
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2015 - 12/2015

<141>

×al>	<s2></s2>	<#3>	 <bi>&gt;</bi>	<b2></b2>	<bs></bs> th3>	scl>	<c2></c2>	<b>43</b>	<a>b</a>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performacne data is uploaded (yes/no)
NC	Rutherford	0000	0	0	0	0.0	0.0	0.0	Yes
								-	
									•
				_					
			1						
							1		

	P	•	
	0	Percentage of Total	0
Percentage of		Road Miles covered	
Total Population		by Service	
Reached by			
Service			

#### **FCC FORM 690**

## (060) COVERAGE AND PERFORMANCE REPORT

Carolina West Wireless, LLC did not complete any drive tests with respect to the SAC associated with this filing during the reportable period.

#### Carolina West Wireless, Inc.

#### **Project Status Description**

Pursuant to Section 54.1009(a)(6) of the Commission's rules, Carolina West Wireless, Inc. ("CWW") submits that, during the reportable period, there were no material updates to its project description, network design, construction, deployment and maintenance associated with this Study Area Code ("SAC") that was provided by CWW in its long-form application (the "FCC Form 680") filed in conjunction with its Auction 901 winning bids.

During the reportable period, CWW continued to construct and deploy its network in the eligible areas associated with this SAC. It anticipates that it will submit its drive testing data in conjunction with its request for final disbursement no later than July 19, 2016.

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

The same of the sa	Fund §54.1009 Annual Reporting lection Form		Avg. Burder	FCC Form Approved by OMB OMB 3060-1185 Estimate per Respondent: 18 Hours
<010>	Study Area Code	238030		
	Study Area Name	Carolina West Wireless, Inc.		Accepted / Filed
<020>	Program Year	2016		
<030>		Todd Slamowitz		JUN Z 3 ZU16  Federal Communications Commission
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.		Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com		
<040>	Has the information required pursuant to §54.1009  <041> Attach a description of the documents fil  <042> Cite the Study Area Code (SAC) for the Fo	led with the Form 481 reporting	(Y/N) <040> O <041> <042>	•
<080>	Tribal Lands Reporting (y/n?) (Does this study area co	ver tribal lands? Yes or No)	0	<b>⊙</b>

#### Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

TERUPUS PUNIUS				FCC F-+- CDC
(050) Carr	ier Contact Form			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
		<u> </u>		
<010>	Study Area Code		238030	
<015> <020>	Study Area Name		Carolina West Wireless, Inc.	
<030>	Program Year  Contact Name - Person USAC should contact regarding	this data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identif		7035848678 ext.	
<039>	Contact Email Address - Email Address of person identi	fied in data line <030>	tslamowitz@fcclaw.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder			
<110>	FCC Registration Number	1940022		
<111>	Filing Carrier Name	Carolina West Wirel	.ess, Inc.	
<112>	Winning Bidder Carrier Name	Carolina West Wirel		
<113>	Street Address (or PO Box)	1307 Curtis Bridge		
<114>	City	Wilkesboro		-
<115>	State	NC		
<116>	Zip-Code	28697	* ************************************	<del></del>
<117>	Telephone Number	3369735000 ext.		<del></del>
<118>	Fax Number			
<119>	Email Address	3368387550		
1110	Zindii / todi cos	slaytons@carolinawe	est.com	
Contact Ir	if same as above, indicate in this box  Name (First, MI, Last, Suffix)	Slavton S. Stewart		
<121>	Filing Carrier Name	Carolina West Wirel	ess, Inc.	
<122>	Street Address (or PO Box)	1307 Curtis Bridge	Road	
<123>	City	Wilkesboro		
<124>	State	NC		
<125>	Zip-Code	28697		
<126>	Telephone Number	3369735000 ext.		
<127>	Fax Number	3368387550		
<128>	Email Address	slaytons@carolinawe	st.com	
Authorize	d Agent Information if no agent, indicate in this box			
<130>	Name (First, MI, Last, Suffix)	Todd Slamowitz		
<131>	Company	Lukas, Nace, Gutier	rez & Sacha. LLP	
<132>	Street Address (or PO Box)	8300 Greensboro Driv		
<133>	, ,			
	City	McLean		
<134>	State	VA		
<135>	Zip-Code	22102		
<136>	Telephone Number	7035848678 ext.		
<137>	Fax Number	7035848696		
<138>	Email Address	tslamowitz@fcclaw.co	om.	

(060) Coverage and Performance	Report	FCC Fo	rm 690
			ved by OMB
		Page 3	ontrol No. 3060-1185 of 8

Study Area Code	238030
Study Area Name	Carolina West Wireless, Inc.
Program Year	2016
Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
Coverage and Performance Report Year 01/2015 - 12/2015	
	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>

060\_Coverage and Performance Report (Unconsructed).zip

Coverage and Performace attachments

<141>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<cl></cl>	<c2></c2>	<c3></c3>	<d>&gt;</d>
				Resident	I -	Total Resident Population	Road Miles per Census	Road Miles per Census Block Newly	Total Road Miles covered per Census	Certify that Coverage and Performance data is uploaded (Yes/no)
	State	County	Census Block		by Service		Census Biock		Block	(Yes/no)
	<u></u>									
				9	ee attach	ed worksl	neet			
						<u> </u>				
					-					

	0		0
Percentage of Total		Percentage of Total	
Population Reached by		Road Miles covered	
Service		by Service	

(070) Urban Rate Comparability Certification Compliance	
FCC For	m 690
Angrove	ed by OMB
OMRC	ontrol No. 3060-1185
Onga f /	

<010>	Study Area Code	238030
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

I certify that I am an officer or employee or form and in any attachments is accurate.	f the reporting carrier; my responsibi	lities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this
Name of Reporting Carrier:		
Signature of Authorized Officer:	CERTIFIED ONLINE	Date 06/23/2016
Printed name of Authorized Officer:	Thad Southers	
Title or position of Authorized Officer:	CFO	
Telephone number of Authorized Officer:	3369735090 ext.	
Study Area Code of Reporting Carrier:		Filing Due Date for this form:

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

certify that (Name of Agent) Lukas, Nace, Gutierr	Sachs, LLP is authorized to submit the information reported on behalf of the re reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) report	porting
authorized agent; and, to the best of my knowledge, the	reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) report orts and data provided to the authorized agent is accurate.	ed to the
	Gutierrez & Sachs, LLP	
Name of Reporting Carrier: Carolina	t Wireless, Inc.	
Signature of Authorized Officer or Employee:	Date:	
Printed name of Authorized Officer or Employee:		
Title or position of Authorized Officer or Employee:		
Telephone number of Authorized Officer or Employee:		
Study Area Code of Reporting Carrier: 238030	Filing Due Date for this form: 07/01/2016	
Persons willfully making false statements on this form	e punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonr	
5 Table 1 Tabl	under Title 18 of the United States Code, 18 U.S.C. § 1001.	nent

l, as agent for the reporting carrier, certify that I am authori data provided by the reporting carrier; and, to the best of m	zed to submit the certification on behalf of the repo ty knowledge, the information reported berein is ac	orting o	carrier; I have provi	ded the data reported herein based of
Name of Reporting Carrier:	Carolina West Wireless, Inc.		·•	
Name of Authorized Agent Firm:	Lukas, Nace, Gutierrez & Sachs, LLP			
ignature of Authorized Agent or Employee of Agent:	The state of the s			Date: 06/17/2016
lame of Authorized Agent Employee:	Todd Slamowitz			2010: 00, 1., 2020
itle or position of Authorized Agent or Employee of Agent	FCC Legal Counsel			
elephone number of Authorized Agent or Employee of Agen	t: 7035848678 ext.		·	
itudy Area Code of Reporting Carrier: 238030	Filing Due Date for this form	n· 0	07/01/2016	· · · · · · · · · · · · · · · · · · ·

(080) Trib	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		238030	
<015>	Study Area Name		Carolina West Wireless, Inc.	
<020>	Program Year		2016	
<030>	Contact Name - Person USAC should contact regarding	this data	Todd Slamowitz	
<035> <039>	Contact Telephone Number - Number of person identificant Email Address - Email Address - Email Address of person identificant Email Address - Email Addres		205	
<142>	State		5UP tslamowitz@fcclaw.com	
<143>	County		·	
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation	Name of Attached D	ocument (.pdf)	
	If your company serves Tribal lands, please select (Yes, leach of these boxes to confirm the status described on PDF, on line 145, demonstrates coordination with the T government pursuant to § 54.1004 includes:	the attached	) for	
<146>	Needs assessment and deployment planning with a foc community anchor institutions;		Select (Yes, No, Not Applicable)	
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;	Ţ		
<149>	Compliance with Rights of way processes	ţ		
<150>	Compliance with Land Use permitting requirements	<u></u>		
<151>	Compliance with Facilities Siting rules	}		
		ŀ		
<152>	Compliance with Environmental Review processes	ļ.		
<153>	Compliance with Cultural Preservation review processes	;	i	

<154> Compliance with Tribal Business and Licensing requirements.

(090) Project	Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185
\$110546116511651166116651165		Page 5 of 8
<010>	Study Area Code	238030
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<200> <201>	Date Authorized to Receive Support  Targeted Completion Date	07/18/2013
		07/19/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210> <211>	Actual Completion Date  Project Status Description (attached)	211_PSD_NC.pdf
	Please shock those haves below to confirm that the attached DDF and live	{Name of PDF attached}
<212> <213> <214> <215> <216> <217>	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.  Status of Network Deployment - Network Design  Status of Network Deployment - Construction  Status of Network Deployment - Deployment  Status of Network Deployment - Maintenance  Project Budget Status  Project Plan Status	V V V
<218>	Network will Support 3G/4G Mobile Service ?	3G • 4G

(101) Certification - Reporting Carrier	FCC Form 690
	Approved by OMB OMB Control No. 3060-1185
	Page 7 of 8

<010>	Study Area Code	238030
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.		
Name of Reporting Carrier:		
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/23/2016	
Printed name of Authorized Officer: Thad Southers		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer: 3369735090 ext.		
Study Area Code of Reporting Carrier: Filing Due Dat	e for this form:	

102) Certification - Agent / Carrier
FCC Form 690
Approved by OMB
OMB Control No. 3060-1185
Page 8 of 8

_<010>	Study Area Code	238030
_<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

l certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachi also certify that I am an officer of the reporting carrier; my respons agent; and, to the best of my knowledge, the reports and data prov	sibilities include ensuring the accuracy of the data reporting requirements provided to the authorized
Name of Authorized Agent: Lukas, Nace, Gutierrez & Sachs,	LLP
Name of Reporting Carrier: Carolina West Wireless, Inc.	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier: 238030	Filing Due Date for this form: 07/01/2016

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier			
I, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.			
Name of Reporting Carrier:	Carolina West Wireless, Inc.		
Name of Authorized Agent Firm:	Lukas, Nace, Gutierrez & Sachs, LLP		
Signature of Authorized Agent or Emplo	yee of Agent:	Date: 06/17/2016	
Name of Authorized Agent Employee:	Todd Slamowitz		
Fitle or position of Authorized Agent or	Employee of Agent FCC Legal Counsel		
Telephone number of Authorized Agent	or Employee of Agent: 7035848678 ext.		
	238030 Filing Due Date for this form:	07/01/2016	